

Navajo Nation Film Office

OFFICE OF BROADCAST SERVICES - Division of Human Resources

LOCATION EXPENDITURE REPORT

Please submit report at the conclusion of the project

Production Company: _____

Address: _____ City: _____ State: _____ Zip: _____

Contact Number: _____ Fax: _____

Location(s): _____

Arrival Date: _____ Departure Date: _____

Title/Production Name: _____

Please circle: Filming / Photography

Commercial Still Television Documentary Music Video Educational Corporate Video Website

Photography Tour Motion Picture Publication Print PSA Still, Editorial Other

Project Transactions Type: Cash _____ Money Order _____ Corporate Check _____ Cashiers Check _____

Navajo Nation Film Office Permit Fees: \$ _____

Other Permit Fees [NNPR, NPS, AZ/NM Film, DOT, DPS, etc.] \$ _____

Actual Number Days of Production: \$ _____

Cost of Lodging [i.e., Hotel, Motel, Hogan, Camping, etc.]: \$ _____

Number of Navajo Nation Technicians Hired: _____

Number of Navajo Nation Labor Hired: _____

Number of Navajo Nation Talent/Actor/Extras Hired: _____

Navajo Nation Liaison / Guides / Location Mgr. Hired: _____

Fees: \$ _____

Equipment Rentals: \$ _____

Set Construction Costs: \$ _____

Studio / Stage Rental: \$ _____

Local Catering: \$ _____

Security: \$ _____

Community / Chapter Fees: \$ _____

Tribal Department Fees: \$ _____

Fuel / Transportation Costs: \$ _____

Navajo Livestock / Animal Costs: \$ _____

Other Miscellaneous Cost: \$ _____

Thank you from the Navajo Nation Film Office for your cooperation in reporting expenses incurred while conducting both filming / photography activities on the Navajo Nation. The Navajo Film Office will benefit from the information exchanged to improve the working conditions and support for future projects. Ensure the Navajo Nation resources, culture and people utilized in such events are protected, promoted and authorized as agreed. The report supports the validation of all filming / photography activities across the Navajo Nation.

Comments: _____

Producer/Production Manager: _____ Signature/Date: _____